

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street)

1444 DUKE STREET

Check if different  
than previously  
reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00255695

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the  
State of

M M M / D D D / Y Y Y Y Y Y

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the  
State of

M M M / D D D / Y Y Y Y Y Y

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

02

M M M / D D D / Y Y Y Y Y Y

01

M M M / D D D / Y Y Y Y Y Y

2018

through

M M M / D D D / Y Y Y Y Y Y

02

M M M / D D D / Y Y Y Y Y Y

28

M M M / D D D / Y Y Y Y Y Y

2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hagan, Timothy, R., Mr.,

Type or Print Name of Treasurer

Signature of Treasurer

Hagan, Timothy, R., Mr.,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

03

M M M / D D D / Y Y Y Y Y Y

20

M M M / D D D / Y Y Y Y Y Y

2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y 02 / 01 / 2018 To: M M / D D / Y Y Y Y 02 / 28 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y</span> 2018		156280.56
(b) Cash on Hand at Beginning of Reporting Period.....	228593.27	
(c) Total Receipts (from Line 19) .....	199739.84	401292.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	428333.11	557572.77
7. Total Disbursements (from Line 31).....	128352.70	257592.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	299980.41	299980.41
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 02 / 01 / 2018

To:

 M M / D D / Y Y Y Y Y  
 02 / 28 / 2018
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

117964.00

231100.00

(ii) Unitemized .....

78922.83

165829.20

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

196886.83

396929.20

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

2833.01

3983.01

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

199719.84

400912.21

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

20.00

380.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

199739.84

401292.21

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

199739.84

401292.21

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	127420.70	252341.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	127420.70	252341.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	4000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	932.00	1251.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	932.00	1251.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	128352.70	257592.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	128352.70	257592.36

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	199719.84	400912.21
34. Total Contribution Refunds (from Line 28(d)) .....	932.00	1251.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	198787.84	399661.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	127420.70	252341.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	127420.70	252341.36

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5H-CB

Form/Schedule: F3XN

Transaction ID :

The Committee wishes to disclose the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate(s). 2) The Libertarian National Committee (LNC) requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR 104.7(b)(1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. This 'follow up' request a) clearly asks for the missing information without requesting a contribution, b) informs the contributor of the requirements for reporting such information under federal law, and c) is enclosed with a pre-addressed envelope when sent by postal mail. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is updated in memo entries filed with the next regularly scheduled report. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Agan, Christopher, P., ,

Mailing Address PO Box 216

City  
BedfordState  
INZip Code  
47421-0216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

The Home Depot

Occupation (for Individual)

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2018

Transaction ID : SA11AI.56326

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Chuck, , ,

Mailing Address 1200 Sumter Ave N

City

Golden Valley

State

MN

Zip Code

55427-4541

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Crawford Merz Anderson Construction

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2018

Transaction ID : SA11AI.56362

Amount of Each Receipt this Period

125.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Andrews, Willard, M., ,

Mailing Address 2610 W Rainbow Dr

City

Camp Verde

State

AZ

Zip Code

86322-4900

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2018

Transaction ID : SA11AI.56369

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

5554.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Bailey, Brook, L., ,**

Mailing Address 1005 Amherst Dr Apt 1011

City  
Bedford

State  
TX

Zip Code  
76021-2322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Citi

Occupation (for Individual)

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2018

Transaction ID : SA11AI.56421

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Bake, Justin, , ,**

Mailing Address 2711 W Deer Run Dr

City  
Stockton

State  
UT

Zip Code  
84071-7724

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Dell emc

Occupation (for Individual)

Technical support engineer 1

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.00

Date of Receipt

MM / DD / YYYY  
02 / 02 / 2018

Transaction ID : SA11AI.56426

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Baker, Rhys, , ,**

Mailing Address 36541 Jefferson Ct Apt 843

City  
Farmington Hills

State  
MI

Zip Code  
48335-1938

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Die-Namic

Occupation (for Individual)

Machinist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 23 / 2018

Transaction ID : SA11AI.56430

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

788.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Baker, Stephen, J., Mr.,**

Mailing Address 1551 E 80th St Apt 18

City  
Minneapolis

State  
MN

Zip Code  
55425-1162

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Seagate Technology

Occupation (for Individual)  
Production Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2018

Transaction ID : SA11AI.56432

Amount of Each Receipt this Period

459.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Barris, Roger, D., ,**

Mailing Address 24853 Chris Dr

City  
Evergreen

State  
CO

Zip Code  
80439-5642

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2018

Transaction ID : SA11AI.56450

Amount of Each Receipt this Period

129.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Batuski, James, , ,**

Mailing Address 14560 Route 19

City  
Cambridge Springs

State  
PA

Zip Code  
16403-9119

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2018

Transaction ID : SA11AI.56462

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

838.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Becker, Steven, G.T., Dr.,**

Mailing Address 418 Helendale Rd

City  
Rochester

State  
NY

Zip Code  
14609-3108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Anthony Jordan Health Center

Occupation (for Individual)  
Optometrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.56485

Amount of Each Receipt this Period

139.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BitPay Merchant Services**

Mailing Address 3423 Piedmont Rd NE  
Suite 200

City  
Atlanta

State  
GA

Zip Code  
30305-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2018

Transaction ID : SA11AI.59694

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution of bitcoins via Bitpay Merchant Services  
(See Memo)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Dunn, Nathan, , ,**

Mailing Address 40 Sanford St

City  
Glens Falls

State  
NY

Zip Code  
12801-2927

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Best Efforts Info Requested

Occupation (for Individual)  
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2018

Transaction ID : SA11AI.59694.0

Amount of Each Receipt this Period

25.00

☒ Memo Item  
Contribution made through Bitpay Merchant Services

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

164.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.59694

This contribution was conducted through Bitpay, an online bitcoin payment processor. The contribution was denominated in U.S. dollars through the Libertarian National Committee website, converted from bitcoin into U.S. dollars by Bitpay at a fixed conversion rate at the time of the transaction, and the contribution deposited in U.S. dollars by Bitpay into the Libertarian National Committee bank account on the following business day. The name, address, employer, and occupation of the contributor were collected on the website at the time of the contribution, the contribution was deemed to be eligible, and all information has been disclosed on Schedule A, Line 11(a)(i) (11 C.F.R. 104.3 (a)(4), 104.8) . Thus the Committee has complied with the deposit requirement (11 C.F.R. 103.2) and the requirement of keeping account of contributor information and determining the eligibility of the contribution (11 C.F.R. 103.3(b), 110.4, and Advisory Opinion 2012-26. The contribution has been reported at the full amount in U.S. dollars and all transaction fees have been disclosed in U.S. dollars on Schedule B, Line 21(b). 11 C.F.R.102.9(b), 104.3(b)(3)-104.3(b)(4). Since the LNC did not receive bitcoins directly, it does not know the amount of bitcoins exchanged. This transaction has been disclosed to comply with the requirements of Advisory Opinion 2014-02.

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Bowden, Craig, R., ,**

Mailing Address 2888 N 400 E

City  
North Ogden

State  
UT

Zip Code  
84414-2070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2018

Transaction ID : SA11AI.56585

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Bowden, Craig, R., ,**

Mailing Address 2888 N 400 E

City  
North Ogden

State  
UT

Zip Code  
84414-2070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2018

Transaction ID : SA11AI.56586

Amount of Each Receipt this Period

129.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Bray, Neil, , Mr.,**

Mailing Address 13279 Tierra Heights Rd

City  
Redding

State  
CA

Zip Code  
96003-7488

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2018

Transaction ID : SA11AI.56615

Amount of Each Receipt this Period

125.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

363.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Brooks, Gary, , ,**

Mailing Address 110 E Main St

City  
Iron Mountain

State  
MI

Zip Code  
49801-2208

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Electrician/disabled

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2018

**Transaction ID : SA11AI.56645**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Brown, Caroline, , Mrs.,**

Mailing Address 711 W Ridge Rd

City  
Elizabethtown

State  
PA

Zip Code  
17022-8519

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Homemaker/Exelon

Occupation (for Individual)  
Homemaker/SRO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.56649**

Amount of Each Receipt this Period

239.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Brown, Caroline, , Mrs.,**

Mailing Address 711 W Ridge Rd

City  
Elizabethtown

State  
PA

Zip Code  
17022-8519

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Homemaker/Exelon

Occupation (for Individual)  
Homemaker/SRO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

478.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.56650**

Amount of Each Receipt this Period

239.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

728.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Caroline, , Mrs.,

Mailing Address 711 W Ridge Rd

City  
ElizabethtownState  
PAZip Code  
17022-8519FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Homemaker/ExelonOccupation (for Individual)  
Homemaker/SRO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2018

Transaction ID : SA11AI.56651

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bueno, Martha, , ,

Mailing Address 12350 SW 45th St

City  
MiamiState  
FLZip Code  
33175-4712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Martha Bueno, PAOccupation (for Individual)  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2018

Transaction ID : SA11AI.56686

Amount of Each Receipt this Period

459.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buhacoff, Jonathan, , ,

Mailing Address 11737 Arista Way

City  
Rancho CordovaState  
CAZip Code  
95742-8036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Intel CorpOccupation (for Individual)  
Systems Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2018

Transaction ID : SA11AI.56688

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

734.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 103

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Burkholder, Matt, , ,**

Mailing Address PO Box 88

City  
CozadState  
NEZip Code  
69130-0088FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Island DehyOccupation (for Individual)  
Agriculture

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		14		2018

Transaction ID : SA11AI.56698

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Burris, Michael, R., Mr.,**

Mailing Address 1923 Ravenscroft Dr

City  
AustinState  
TXZip Code  
78748-3423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		02		2018

Transaction ID : SA11AI.56702

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Capelli, Peter, , ,**

Mailing Address 4 Holly Ln Apt 4

City  
TonawandaState  
NYZip Code  
14150-2866FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Best Efforts Info RequestedOccupation (for Individual)  
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		02		2018

Transaction ID : SA11AI.56736

Amount of Each Receipt this Period

239.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1168.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Capelli, Peter, , ,**

Mailing Address 4 Holly Ln Apt 4

City  
Tonawanda

State  
NY

Zip Code  
14150-2866

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.56737

Amount of Each Receipt this Period

15.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Cenkus, Mark, Allen, Mr.,**

Mailing Address 6810 Chessley Chase Dr

City  
Sugar Land

State  
TX

Zip Code  
77479-5951

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Dow Chemical

Occupation (for Individual)

Chemical Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.56768

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Christian, Shane, , ,**

Mailing Address 316 S Dixon St

City  
Gainesville

State  
TX

Zip Code  
76240-4721

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

6-4-3 Construction Solutions, LLC

Occupation (for Individual)

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2018

Transaction ID : SA11AI.56784

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1565.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Gregory, , ,

Mailing Address 189 E Nelson Ave Pmb 119

City  
WasillaState  
AKZip Code  
99654-6462FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Conocophillips Alaska inc

Occupation (for Individual)

Inactive employee on disability. Was p

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2018

Transaction ID : SA11AI.56792

Amount of Each Receipt this Period

259.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Gregory, , ,

Mailing Address 189 E Nelson Ave Pmb 119

City  
WasillaState  
AKZip Code  
99654-6462FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Conocophillips Alaska inc

Occupation (for Individual)

Inactive employee on disability. Was p

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2018

Transaction ID : SA11AI.56793

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Clift, Carolyn, C., Ms.,

Mailing Address 6402 Hampton Dr

City  
AnchorageState  
AKZip Code  
99504-4534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.56802

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

1368.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clift, Robert, E., ,

Mailing Address 6402 Hampton Dr

City  
AnchorageState  
AKZip Code  
99504-4534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.56803

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Commey, Aaron, , ,

Mailing Address 2448 Cambreleng Ave # 1

City  
BronxState  
NYZip Code  
10458-6216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

G.R.C.

Occupation (for Individual)

Porter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2018

Transaction ID : SA11AI.56832

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Craig, Daniel, A., Dr.,

Mailing Address 872 Fox Valley Place SW

City  
RochesterState  
MNZip Code  
55902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Mayo Clinic

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2018

Transaction ID : SA11AI.56883

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1038.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crawford, Cristina, M., Ms.,

Mailing Address PO Box 226

City  
SherbornState  
MAZip Code  
01770-0226FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2018

Transaction ID : SA11AI.56885

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cvach, Susan, L., Ms.,

Mailing Address HC 67 Box 36

City  
Marble CanyonState  
AZZip Code  
86036-9706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Homeschooling Mom

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2018

Transaction ID : SA11AI.56909

Amount of Each Receipt this Period

459.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. D'Angelo, Mario, , ,

Mailing Address 69 Timber Ridge Dr

City  
HoltsvilleState  
NYZip Code  
11742-1656FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
No oneOccupation (for Individual)  
College student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2018

Transaction ID : SA11AI.56914

Amount of Each Receipt this Period

459.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

1068.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Davenport, John, W., ,**

Mailing Address 7620 Lebanon Rd

City  
Mount Juliet

State  
TN

Zip Code  
37122-7209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2018

Transaction ID : SA11AI.56926

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Davis, Charles, R., ,**

Mailing Address 5517 Blairwood Dr

City  
Indianapolis

State  
IN

Zip Code  
46237-6382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2018

Transaction ID : SA11AI.56928

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Deaton, Thomas, , ,**

Mailing Address 10321 E Lind Rd

City  
San Tan Valley

State  
AZ

Zip Code  
85143-8175

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Nikon Precison

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2018

Transaction ID : SA11AI.56955

Amount of Each Receipt this Period

259.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

759.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Deaton, Thomas, , ,**

Mailing Address 10321 E Lind Rd

City  
San Tan ValleyState  
AZZip Code  
85143-8175FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Nikon PrecisonOccupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	28	2018

**Transaction ID : SA11AI.56956**

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Delas, Anthony, , Mr.,**

Mailing Address 16306 Lilac Ln

City  
Los GatosState  
CAZip Code  
95032-3525FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	21	2018

**Transaction ID : SA11AI.56968**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Demarest, David, Pratt, ,**

Mailing Address 10812 Park Meadows Plz # 133

City  
OmahaState  
NEZip Code  
68142-1120FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Roads to Freedom FoundationOccupation (for Individual)  
Owner, Founder, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	03	2018

**Transaction ID : SA11AI.56973**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution
**SUBTOTAL** of Receipts This Page (optional)..... ►

409.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 22 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Demarest, David, Pratt, ,**

Mailing Address 10812 Park Meadows Plz # 133

City  
Omaha

State  
NE

Zip Code  
68142-1120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Roads to Freedom Foundation

Occupation (for Individual)  
Owner, Founder, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2018

Transaction ID : SA11AI.56974

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Demarest, David, Pratt, ,**

Mailing Address 10812 Park Meadows Plz # 133

City  
Omaha

State  
NE

Zip Code  
68142-1120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Roads to Freedom Foundation

Occupation (for Individual)  
Owner, Founder, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2018

Transaction ID : SA11AI.56975

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Demarest, David, Pratt, ,**

Mailing Address 10812 Park Meadows Plz # 133

City  
Omaha

State  
NE

Zip Code  
68142-1120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Roads to Freedom Foundation

Occupation (for Individual)  
Owner, Founder, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

545.00

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2018

Transaction ID : SA11AI.56976

Amount of Each Receipt this Period

45.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

245.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Dodd, Michael, , ,**

Mailing Address 1514 Jefferson Ave

City  
New Orleans

State  
LA

Zip Code  
70115-4121

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United States Risk Management

Occupation (for Individual)  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.57005**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Dodd, Michael, , ,**

Mailing Address 1514 Jefferson Ave

City  
New Orleans

State  
LA

Zip Code  
70115-4121

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
United States Risk Management

Occupation (for Individual)  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2018

**Transaction ID : SA11AI.57006**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Dossinger, Duane, W., Mr.,**

Mailing Address 2198 County Road 95

City  
Florence

State  
CO

Zip Code  
81226-9513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2018

**Transaction ID : SA11AI.57019**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Dunn, Aubrey, , ,**

Mailing Address HC 75 Box 49

City  
Mountainair

State  
NM

Zip Code  
87036-9201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Rancher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 16 / 2018

Transaction ID : SA11AI.57049

Amount of Each Receipt this Period

459.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Dunn, Aubrey, , ,**

Mailing Address HC 75 Box 49

City  
Mountainair

State  
NM

Zip Code  
87036-9201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Rancher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 23 / 2018

Transaction ID : SA11AI.57050

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ernst, Jonathan, C., Mr.,**

Mailing Address 4206 Maple St

City  
Perry

State  
OH

Zip Code  
44081-8630

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BHI Energy

Occupation (for Individual)  
Radiation Protection/Safety

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2018

Transaction ID : SA11AI.57122

Amount of Each Receipt this Period

125.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Eudy, Dan, , Mr., Jr.**

Mailing Address 902 Oak Dr

City

Morehead City

State

NC

Zip Code

28557-6263

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Walgreens

Occupation (for Individual)

pharmacist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2018

**Transaction ID : SA11AI.57128**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Evans, Jonathan, , ,**

Mailing Address 10505 S Ih 35 Apt 2024

City

Austin

State

TX

Zip Code

78747-2652

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Rackspace Hosting

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.57132**

Amount of Each Receipt this Period

139.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Evans, Jonathan, , ,**

Mailing Address 10505 S Ih 35 Apt 2024

City

Austin

State

TX

Zip Code

78747-2652

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Rackspace Hosting

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

387.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.57133**

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

398.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Evans, Jonathan, , ,**

Mailing Address 10505 S Ih 35 Apt 2024

City  
AustinState  
TXZip Code  
78747-2652FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Rackspace HostingOccupation (for Individual)  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.57134

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Evans, Jonathan, , ,**

Mailing Address 10505 S Ih 35 Apt 2024

City  
AustinState  
TXZip Code  
78747-2652FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Rackspace HostingOccupation (for Individual)  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2018

Transaction ID : SA11AI.57135

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ferreira, Timothy, , ,**

Mailing Address 840 E Green St Unit 117

City  
PasadenaState  
CAZip Code  
91101-5429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DigiStack Inc.Occupation (for Individual)  
Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2018

Transaction ID : SA11AI.57156

Amount of Each Receipt this Period

459.00

☐ Memo Item  
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

593.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ferreira, Timothy, , ,**

Mailing Address 840 E Green St Unit 117

City  
Pasadena

State  
CA

Zip Code  
91101-5429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DigiStack Inc.

Occupation (for Individual)  
Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2018

Transaction ID : SA11AI.57157

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Fisher, Angela, , ,**

Mailing Address 6130 Carvel Ave Apt 23

City  
Indianapolis

State  
IN

Zip Code  
46220-2044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
American Resolution Center

Occupation (for Individual)  
Corp Conflict Resolution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2018

Transaction ID : SA11AI.57174

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Fochler, Edward, , ,**

Mailing Address 2286 Howland Dr

City  
Forest Hill

State  
MD

Zip Code  
21050-2556

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DCS Corp

Occupation (for Individual)  
Computer Sys. Admin.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2018

Transaction ID : SA11AI.57194

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1759.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Gholston, J. James, , ,**

Mailing Address 2204 Georgetown Dr

City  
Denton

State  
TX

Zip Code  
76201-0737

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Dimensionality

Occupation (for Individual)

Software Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2018

Transaction ID : SA11AI.57284

Amount of Each Receipt this Period

300.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Guetter, Peter, , ,**

Mailing Address PO Box 23

City

Wabasso

State

MN

Zip Code

56293-0023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Alina Health

Occupation (for Individual)

Radiology Technologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2018

Transaction ID : SA11AI.57385

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hall, Jared, Frederick, ,**

Mailing Address 4110 N College Ave

City

Indianapolis

State

IN

Zip Code

46205-2739

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Greatbatch Medical

Occupation (for Individual)

Machinist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2018

Transaction ID : SA11AI.57415

Amount of Each Receipt this Period

259.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

709.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hallberg, David & Kathleen, , ,**

Mailing Address 1405 Rio Bend Ct

City  
Grapevine

State  
TX

Zip Code  
76051-8801

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2018

Transaction ID : SA11AI.57417

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hayes, Daniel, E., ,**

Mailing Address 216 Manson Ave Apt B

City

Metairie

State

LA

Zip Code

70001-4861

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Massage Therapist/Ride Share Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.57477

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hayes, Daniel, E., ,**

Mailing Address 216 Manson Ave Apt B

City

Metairie

State

LA

Zip Code

70001-4861

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Massage Therapist/Ride Share Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2018

Transaction ID : SA11AI.57478

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Henchman, Joseph, D., Mr.,**

Mailing Address 60 Q St NE

City  
Washington

State  
DC

Zip Code  
20002-2106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Tax Foundation

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2018

Transaction ID : SA11AI.57496

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Henchman, Joseph, D., Mr.,**

Mailing Address 60 Q St NE

City  
Washington

State  
DC

Zip Code  
20002-2106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Tax Foundation

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.57497

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hertzsch, Gregory, T., ,**

Mailing Address 120 Hills Dr

City  
Clarksville

State  
IN

Zip Code  
47129-2539

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Vivid Impact, Inc.

Occupation (for Individual)  
Shipping Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.57521

Amount of Each Receipt this Period

10.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

464.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Higgins, Jim, E., Mr.,**

Mailing Address 11944 Craig View Dr

City  
Saint Louis

State  
MO

Zip Code  
63146-5428

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2018

Transaction ID : SA11AI.57526

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hinkle, Linda, A., ,**

Mailing Address 17545 Chesbro Lake Dr

City  
Morgan Hill

State  
CA

Zip Code  
95037-9104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.57535

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hinkle, Mark, W. A., Mr.,**

Mailing Address 17545 Chesbro Lake Dr

City  
Morgan Hill

State  
CA

Zip Code  
95037-9104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Life Saver Pool Fence

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.57536

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1108.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hudler, James, Lewis, Dr.,**

Mailing Address 17165 Fahrner Rd

City  
Chelsea

State  
MI

Zip Code  
48118-9721

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Virologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2018

Transaction ID : SA11AI.57587

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ingraham, Irving, , , Jr.**

Mailing Address 115 Federal St

City  
Salem

State  
MA

Zip Code  
01970-3241

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

North Shore Physicians Group

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2018

Transaction ID : SA11AI.57629

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kindel, Lupe, Hernandez, ,**

Mailing Address 800 W 1st St Apt 2405

City  
Los Angeles

State  
CA

Zip Code  
90012-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2018

Transaction ID : SA11AI.57759

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Kingery, William, H., Dr., Sr.**

Mailing Address 476 Bay Harbour Rd

City  
Mooresville

State  
NC

Zip Code  
28117-9059

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Kingery & Kingery DDS PLLC

Occupation (for Individual)

Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2018

Transaction ID : SA11AI.57765

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Klinker, Eric, J., ,**

Mailing Address 17105 Rogers Rd

City  
Eden Prairie

State  
MN

Zip Code  
55347-3367

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Dow Chemical

Occupation (for Individual)

Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.57781

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kunz, Cary, Lee, Mr.,**

Mailing Address 7946 Grenezay Rd

City  
Wilmington

State  
NC

Zip Code  
28411-8367

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

General Electric

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2018

Transaction ID : SA11AI.57821

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Laurent, Tom, J., Mr.,**

Mailing Address 616B Normal Park Dr

City  
Huntsville

State  
TX

Zip Code  
77320-3759

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.57860**

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Laurent, Tom, J., Mr.,**

Mailing Address 616B Normal Park Dr

City  
Huntsville

State  
TX

Zip Code  
77320-3759

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

888.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.57861**

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Laurent, Tom, J., Mr.,**

Mailing Address 616B Normal Park Dr

City  
Huntsville

State  
TX

Zip Code  
77320-3759

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

997.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.57862**

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

967.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Laurent, Tom, J., Mr.,**

Mailing Address 616B Normal Park Dr

City  
Huntsville

State  
TX

Zip Code  
77320-3759

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.57863

Amount of Each Receipt this Period

30.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Levasseur, Shawn, S., Mr.,**

Mailing Address 235 Camden St Ste 32 Pmb 113

City  
Rockland

State  
ME

Zip Code  
04841-2563

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Electrotech, Inc.

Occupation (for Individual)  
Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2018

Transaction ID : SA11AI.57907

Amount of Each Receipt this Period

239.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Linker, Jacob, , Mr.,**

Mailing Address 24 Tamarack Rd  
PO Box 822

City  
Alpine

State  
NJ

Zip Code  
07620-0822

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2018

Transaction ID : SA11AI.57925

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Major, James, M., Mr., Jr.**

Mailing Address 2544 Escambia Ave

City  
Pensacola

State  
FL

Zip Code  
32503-4984

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Butler & Associates

Occupation (for Individual)  
Land Surveyor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2018

**Transaction ID : SA11AI.58008**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. McAuley, Gretchen, Mangan, ,**

Mailing Address 3561 Kennesaw Station Dr NW

City  
Kennesaw

State  
GA

Zip Code  
30144-1984

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Best Efforts Info Requested

Occupation (for Individual)  
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.58083**

Amount of Each Receipt this Period

139.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Miksell, Richard, D., Mr.,**

Mailing Address 39668 W Tiger Loop

City  
Ponchatoula

State  
LA

Zip Code  
70454-9605

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mapco Inc

Occupation (for Individual)  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2018

**Transaction ID : SA11AI.58171**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

639.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Moody, Jonathan, W., ,**

Mailing Address 5739 Forbes Ave

City  
Pittsburgh

State  
PA

Zip Code  
15217-1525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NetApp

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2018

Transaction ID : SA11AI.58220

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Nagel, Lee, C., ,**

Mailing Address PO Box 1410

City  
Amherst

State  
OH

Zip Code  
44001-7410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2018

Transaction ID : SA11AI.58279

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nfr, Kyle-Pierre, , ,**

Mailing Address 8633 W 400 N

City  
Michigan City

State  
IN

Zip Code  
46360-9559

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Blak Corporation

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2018

Transaction ID : SA11AI.58304

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1029.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nichols, Byron, K., Mr.,**

Mailing Address 9000 Holly St

City  
Kansas City

State  
MO

Zip Code  
64114-3528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2018

**Transaction ID : SA11AI.58311**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Odden, Robert, , Mr.,**

Mailing Address 1201 42 1/2 Ave NE

City  
Columbia Heights

State  
MN

Zip Code  
55421-3162

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2018

**Transaction ID : SA11AI.58338**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Olney, Judith, Ann, Ms.,**

Mailing Address PO Box 68

City  
Poland

State  
NY

Zip Code  
13431-0068

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self/Olney Apartments

Occupation (for Individual)

Bldg Restore & Apt Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2018

**Transaction ID : SA11AI.58353**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

675.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Olson, Ben, , Mr., III**

Mailing Address PO Box 55

City  
Goodland

State  
FL

Zip Code  
34140-0055

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Minstrel/Entertainer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2018

**Transaction ID : SA11AI.58359**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Osborn, Paul, , Mr.,**

Mailing Address 807 Pequot Ave

City

New London

State

CT

Zip Code

06320-4214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Computer Sciences Corporation

Occupation (for Individual)

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2018

**Transaction ID : SA11AI.58377**

Amount of Each Receipt this Period

125.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Overeem, Susan, , ,**

Mailing Address 734 Jansen St

City

Staten Island

State

NY

Zip Code

10312-4202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Overeem & Assocaites

Occupation (for Individual)

Registered Rep/ Financial Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2018

**Transaction ID : SA11AI.58387**

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

704.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Peak, Ian, , ,**

Mailing Address 2515 Benton Rd

City

Mount Vernon

State

IL

Zip Code

62864-6147

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.58433**

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Peak, Ian, , ,**

Mailing Address 2515 Benton Rd

City

Mount Vernon

State

IL

Zip Code

62864-6147

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.58434**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Peebles, Anthony, Gaines, ,**

Mailing Address 312 S Pensacola Ave

City

Atmore

State

AL

Zip Code

36502-2521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

PBCI

Occupation (for Individual)

Services provider

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2018

**Transaction ID : SA11AI.58444**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

504.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Perez, Otilio, R., , Jr.**

Mailing Address 1611 Reeve St

City  
Arlington

State  
TX

Zip Code  
76010-7929

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Point Innovation

Occupation (for Individual)  
Design Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.58454

Amount of Each Receipt this Period

339.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Perez, Otilio, R., , Jr.**

Mailing Address 1611 Reeve St

City  
Arlington

State  
TX

Zip Code  
76010-7929

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Point Innovation

Occupation (for Individual)  
Design Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.58455

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Perkins, William, , , III**

Mailing Address 6501 Red Hook Plz # 201

City  
St Thomas

State  
VI

Zip Code  
00802-1373

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Small Ventures USA

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2018

Transaction ID : SA11AI.58459

Amount of Each Receipt this Period

33900.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

34264.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pistrutto, Christopher, , ,

Mailing Address 40087 Mission Blvd # 391

City  
FremontState  
CAZip Code  
94539-3680FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Weil, Gotshal & Manges LLPOccupation (for Individual)  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2018

Transaction ID : SA11AI.58491

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pitts, Archie, , ,

Mailing Address 8031 Strathmore Dr

City  
McKinneyState  
TXZip Code  
75070-5787FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2018

Transaction ID : SA11AI.58493

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pollak Malin, Beth, , ,

Mailing Address 1657 Wehunt PI SE

City  
SmyrnaState  
GAZip Code  
30082-7302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Best Efforts Info RequestedOccupation (for Individual)  
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2018

Transaction ID : SA11AI.58499

Amount of Each Receipt this Period

239.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

639.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Pollak Malin, Beth, , ,**

Mailing Address 1657 Wehunt Pl SE

City  
Smyrna

State  
GA

Zip Code  
30082-7302

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2018

**Transaction ID : SA11AI.58500**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Posner, Henry, , Mr., III**

Mailing Address 4383 Schenley Farms Ter

City  
Pittsburgh

State  
PA

Zip Code  
15213-1206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Railroad Development Corp

Occupation (for Individual)  
Railroader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2018

**Transaction ID : SA11AI.58505**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Potter, Pamela, E., Ms.,**

Mailing Address 538 Spring Place Rd NE

City  
White

State  
GA

Zip Code  
30184-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2018

**Transaction ID : SA11AI.58507**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10325.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Power, Rob, N., , III**

Mailing Address 68 Laight St 1B

City  
New York

State  
NY

Zip Code  
10013

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pearson

Occupation (for Individual)

Director of CRM Architecture

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.58514

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Power, Rob, N., , III**

Mailing Address 68 Laight St 1B

City  
New York

State  
NY

Zip Code  
10013

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pearson

Occupation (for Individual)

Director of CRM Architecture

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2018

Transaction ID : SA11AI.58515

Amount of Each Receipt this Period

300.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Proctor, Daniel, E., ,**

Mailing Address 5401 Verner Dr

City  
La Palma

State  
CA

Zip Code  
90623-2043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

TRI WEST LTD.

Occupation (for Individual)

Wholesale

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2018

Transaction ID : SA11AI.58527

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

950.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Pruett, John, , ,**

Mailing Address 146 E North St

City  
Geneva

State  
NY

Zip Code  
14456-1945

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Oleta Holdings LLC

Occupation (for Individual)  
Sole member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2018

**Transaction ID : SA11AI.58531**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Quillen, Erin, , ,**

Mailing Address 1375 N Sunflower Ave

City  
Covina

State  
CA

Zip Code  
91724-1337

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Student

Occupation (for Individual)  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

883.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2018

**Transaction ID : SA11AI.58543**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Reid, Leroy, C., Dr., Jr.**

Mailing Address 1273 Annapolis Dr

City  
Anchorage

State  
AK

Zip Code  
99508-4307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2018

**Transaction ID : SA11AI.58582**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Resz, Steve, , ,**

Mailing Address 1531 Northgate Sq Apt 2

City  
Reston

State  
VA

Zip Code  
20190-3767

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2018

**Transaction ID : SA11AI.58597**

Amount of Each Receipt this Period

5.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rickoll, Jacob, , Mr.,**

Mailing Address 2301 Conti St

City

New Orleans

State

LA

Zip Code

70119-5707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CrescentCare

Occupation (for Individual)

Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.58615**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Riske, Martin, J., Mr.,**

Mailing Address 3101 13th Ave S

City

Fargo

State

ND

Zip Code

58103-3506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

MJR Corp

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2018

**Transaction ID : SA11AI.58627**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

270.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Roberts, Cornelia, Clark, Ms.,**

Mailing Address 202 Lake St

City  
Sherborn

State  
MA

Zip Code  
01770-1606

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2018

Transaction ID : SA11AI.58633

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ross, David, W., Mr.,**

Mailing Address 200 Pennsylvania Ave

City

White House

State

TN

Zip Code

37188-9296

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

viacom

Occupation (for Individual)

media management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2018

Transaction ID : SA11AI.58674

Amount of Each Receipt this Period

259.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rufer, Chris, J., Mr.,**

Mailing Address 724 Main St

City

Woodland

State

CA

Zip Code

95695-3407

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

The Morning Star Company

Occupation (for Individual)

Agriculturalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2018

Transaction ID : SA11AI.58691

Amount of Each Receipt this Period

33900.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

34309.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Russell, Jeffrey, T., Mr.,

Mailing Address 55 Via Da Vinci

City  
Clifton ParkState  
NYZip Code  
12065-2903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Musician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2018

Transaction ID : SA11AI.58701

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ryan, Tracy, Ahn, Ms.,

Mailing Address 1658 Liholiho St Apt 205

City  
HonoluluState  
HIZip Code  
96822-2968FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2018

Transaction ID : SA11AI.58711

Amount of Each Receipt this Period

459.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Salvette, Emily, H., Ms.,

Mailing Address 2016 Devonshire Rd

City  
Ann ArborState  
MIZip Code  
48104-4058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

University of Michigan

Occupation (for Individual)

Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2018

Transaction ID : SA11AI.58723

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

618.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schumann, Charles, K., ,**

Mailing Address 10354 Stephandale Way

City  
Anchorage

State  
AK

Zip Code  
99515-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Microcom

Occupation (for Individual)  
Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2018

**Transaction ID : SA11AI.58794**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sedky, Cherif, , ,**

Mailing Address 3805 Lahser Rd

City

Bloomfield Hills

State  
MI

Zip Code  
48304-2126

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Private Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 03 / 2018

**Transaction ID : SA11AI.58817**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Senrick, Charles, A., ,**

Mailing Address 36 Hy Dr

City

East Schodack

State  
NY

Zip Code  
12063-1732

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

444.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2018

**Transaction ID : SA11AI.58821**

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1179.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Senrick, Charles, A., ,**

Mailing Address 36 Hy Dr

City  
East SchodackState  
NYZip Code  
12063-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018
**Transaction ID : SA11AI.58822**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Senrick, Charles, A., ,**

Mailing Address 36 Hy Dr

City  
East SchodackState  
NYZip Code  
12063-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2018
**Transaction ID : SA11AI.58823**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Shipley, Mike, , ,**

Mailing Address 2020 W Hayward Ave Apt 13

City  
PhoenixState  
AZZip Code  
85021-6947FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Activist

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2018
**Transaction ID : SA11AI.58855**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
Contribution
**SUBTOTAL** of Receipts This Page (optional)..... ►

340.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shulman, Kirk, , ,

Mailing Address 751 S Tourmaline Ct

City  
AnaheimState  
CAZip Code  
92807-4885FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2018

Transaction ID : SA11AI.58863

Amount of Each Receipt this Period

201.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Slantz, William, , ,

Mailing Address 1620 Congress Way

City  
Saint CharlesState  
MOZip Code  
63303-8444FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

W G Slantz Company

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

- 349.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.58889

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sprung, Lowri, , Ms.,

Mailing Address 2155 W Paseo Del Mar

City  
San PedroState  
CAZip Code  
90732-4556FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2018

Transaction ID : SA11AI.58978

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

726.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Curry, B., Dr.,

Mailing Address 2813 Willow Ridge Dr

City  
GarlandState  
TXZip Code  
75044-7843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Texas InstrumentsOccupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2018

Transaction ID : SA11AI.59065

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Taylor, Curry, B., Dr.,

Mailing Address 2813 Willow Ridge Dr

City  
GarlandState  
TXZip Code  
75044-7843FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Texas InstrumentsOccupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 09 / 2018

Transaction ID : SA11AI.59066

Amount of Each Receipt this Period

445.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thomson, Margaret, C., Ms.,

Mailing Address 206 MacIntosh Ln

City  
CentervilleState  
GAZip Code  
31028-6500FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.59096

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

745.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Trolinger, John, , ,

Mailing Address 813 Harbor Blvd # 113

City  
West Sacramento

State  
CA

Zip Code  
95691-2201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2018

Transaction ID : SA11AI.59139

Amount of Each Receipt this Period

159.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tucker, James, , Mr.,

Mailing Address 816 Cookman Ave

City  
National Park

State  
NJ

Zip Code  
08063-1313

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Talen Energy

Occupation (for Individual)  
Power Point Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2018

Transaction ID : SA11AI.59145

Amount of Each Receipt this Period

125.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tuovila, Eric, , Mr.,

Mailing Address 1225 W 8th St

City  
Panama City

State  
FL

Zip Code  
32401-2103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2018

Transaction ID : SA11AI.59150

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

384.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ubinger, Raymond, , ,**

Mailing Address 2604 Englewood Ave # 1

City  
Durham

State  
NC

Zip Code  
27705-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
the system

Occupation (for Individual)  
taxpayer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.00

Date of Receipt

02 / 02 / 2018

**Transaction ID : SA11AI.59161**

Amount of Each Receipt this Period

429.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Vallangigham, Paul, , ,**

Mailing Address 43667 Walden Way

City  
Hemet

State  
CA

Zip Code  
92544-5276

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Best Efforts Info Requested

Occupation (for Individual)  
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

02 / 05 / 2018

**Transaction ID : SA11AI.59174**

Amount of Each Receipt this Period

459.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Watts, Jon, , ,**

Mailing Address 2866 Circle Loop Rd

City  
North Pole

State  
AK

Zip Code  
99705-6707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
My Horizon, LLC

Occupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

254.00

Date of Receipt

02 / 03 / 2018

**Transaction ID : SA11AI.59256**

Amount of Each Receipt this Period

239.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1127.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Watts, Jon, , ,**

Mailing Address 2866 Circle Loop Rd

City  
North Pole

State  
AK

Zip Code  
99705-6707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
My Horizon, LLC

Occupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.59257

Amount of Each Receipt this Period

109.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Watts, Jon, , ,**

Mailing Address 2866 Circle Loop Rd

City  
North Pole

State  
AK

Zip Code  
99705-6707

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
My Horizon, LLC

Occupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.59258

Amount of Each Receipt this Period

15.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weeks II, James, , ,**

Mailing Address 5742 Maunee Dr

City  
Howell

State  
MI

Zip Code  
48843-9114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Best Efforts Info Requested

Occupation (for Individual)  
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 05 / 2018

Transaction ID : SA11AI.59269

Amount of Each Receipt this Period

300.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

424.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wesolowski, Jason, , ,

Mailing Address 6520 Gladys St

City  
MetairieState  
LAZip Code  
70003-4048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

US Navy

Occupation (for Individual)

Cybersecurity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2018

Transaction ID : SA11AI.59282

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wier, R. Harvey, , ,

Mailing Address 301 S Pierce St

City

New Orleans

State

LA

Zip Code

70119-6012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 01 / 2018

Transaction ID : SA11AI.59326

Amount of Each Receipt this Period

150.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilson, Nathan, , ,

Mailing Address 560 Cass Pine Log Rd

City

Rydal

State

GA

Zip Code

30171-1401

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Carpenter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.59354

Amount of Each Receipt this Period

239.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

439.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wilson, Nathan, , ,**

Mailing Address 560 Cass Pine Log Rd

City  
Rydal

State  
GA

Zip Code  
30171-1401

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Carpenter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018

Transaction ID : SA11AI.59355

Amount of Each Receipt this Period

25.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

25.00

117964.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 103

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CRAIG BOWDEN FOR SENATE**

Mailing Address 2888 N 400 E

City  
NORTH OGDEN

State  
UT

Zip Code  
84414

FEC ID number of contributing  
federal political committee.

**C** C00636647

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**02** / **22** / **2018**

**Transaction ID : SA11C.59683**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. JOSEPH G. BUCHMAN FOR US HOUSE**

Mailing Address 584 HILLSIDE CIR

City  
ALPINE

State  
UT

Zip Code  
84004

FEC ID number of contributing  
federal political committee.

**C** C00652925

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2333.01

Date of Receipt

**02** / **05** / **2018**

**Transaction ID : SA11C.59685**

Amount of Each Receipt this Period

2333.01

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

**02** / **05** / **2018**

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

2833.01

**TOTAL** This Period (last page this line number only)..... ►

2833.01

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. A & D Cleaning Service, LLC**

Mailing Address 2878 Ft. Scott Dr. #101

City  
ArlingtonState  
VAZip Code  
22202-2347Purpose of Disbursement  
Cleaning

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59447

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express Merch Services**

Mailing Address P.O. Box 1270

City  
NewarkState  
NJZip Code  
07101-1270Purpose of Disbursement  
Merch Service Fees

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59450

Amount of Each Disbursement this Period

148.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. American National Insurance Co.**

Mailing Address P.O. Box 10707

City  
SpringfieldState  
MOZip Code  
65808-0707Purpose of Disbursement  
LP 401k Employee Contribution & Co Match

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59451

Amount of Each Disbursement this Period

1724.54

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2373.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. B & B Duplicators**

Mailing Address 818 18th Street NW LL15

City  
WashingtonState  
DCZip Code  
20006-0000Purpose of Disbursement  
Non Candidate Party Printing and Mailing Service

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2018

FEC Identification Number

C

Transaction ID : SB21B.59453

Amount of Each Disbursement this Period

412.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. B & B Duplicators**

Mailing Address 818 18th Street NW LL15

City  
WashingtonState  
DCZip Code  
20006-0000Purpose of Disbursement  
Non Candidate Party Printing and Mailing Service

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2018

FEC Identification Number

C

Transaction ID : SB21B.59454

Amount of Each Disbursement this Period

1136.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BackOffice Thinking**

Mailing Address 790 East Market St # 300

City  
West ChesterState  
PAZip Code  
19382-0000Purpose of Disbursement  
Web Support & Consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2018

FEC Identification Number

C

Transaction ID : SB21B.59455

Amount of Each Disbursement this Period

2247.50

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3796.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Bassett, Erick, , ,**

Mailing Address 11800 MLK St N Apt 5108

City  
St. PetersburgState  
FLZip Code  
33716-0000Purpose of Disbursement  
Membership Support Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59456**

Amount of Each Disbursement this Period

348.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BB&T - Branch Banking & Trust**

Mailing Address 1717 King St

City  
AlexandriaState  
VAZip Code  
22314-0000Purpose of Disbursement  
Bank Service Charge

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59457**

Amount of Each Disbursement this Period

258.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BB&T Loan Processing Center**

Mailing Address PO Box 580050

City  
CharlotteState  
NCZip Code  
28258-0050Purpose of Disbursement  
Mortgage Payment

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59458**

Amount of Each Disbursement this Period

2900.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3507.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. BB&T Visa**

Mailing Address P.O. BOX 580340

City  
CharlotteState  
NCZip Code  
28258-0340Purpose of Disbursement  
Credit Card Payment See Memo

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2018

FEC Identification Number

C 

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

 12305.12☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon Cloud Services**

Mailing Address 1200 12th Avenue South #1200

City  
SeattleState  
WAZip Code  
98144-2734Purpose of Disbursement  
Cloud Web Services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2018

FEC Identification Number

C 

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

 12.58☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon.com**

Mailing Address 1200 12th Avenue South #1200

City  
SeattleState  
WAZip Code  
98144-2734Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2018

FEC Identification Number

C 

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

 10.81☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

 12305.12

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. BannersOnTheCheap.com**

Mailing Address 2433 Rutland Dr #130

City  
AustinState  
TXZip Code  
78758-0000Purpose of Disbursement  
LP Promotional Materials

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

269.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CiviHosting - TheOpenHost**

Mailing Address 4272 Lakeridge Ct.

City  
BloomfieldState  
MIZip Code  
48302-0000Purpose of Disbursement  
Voter Database Hosting

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

680.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Comcast**

Mailing Address PO Box 3006

City  
SoutheasternState  
PAZip Code  
19398-3006Purpose of Disbursement  
Cable and Internet Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

186.48

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Custom Ink, Inc.**

Mailing Address PO BOX 198399

City  
AtlantaState  
GAZip Code  
30384-8399Purpose of Disbursement  
LP Promotional Materials

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

6657.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Digital Ocean, Inc.**

Mailing Address 101 6th Ave

City  
New YorkState  
NYZip Code  
10013-0000Purpose of Disbursement  
Software-Plugin

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

4.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Duracard, Inc.**

Mailing Address 8800 Foundry St.

City  
SavageState  
MDZip Code  
20763-9512Purpose of Disbursement  
Membership Card Materials

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

700.34

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. EnvatoMarket**

Mailing Address 3540 E. Longwing Ln. Ste 300

City  
MeridianState  
IDZip Code  
83646-0000Purpose of Disbursement  
Website Plugin

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2018

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook**

Mailing Address 1601 S. California Ave

City  
Palo AltoState  
CAZip Code  
94304-0000Purpose of Disbursement  
Facebook Widget Ad

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2018

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

1658.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. GoGoAir, Inc.**

Mailing Address 111 N. Canal Street, Ste 1500

City  
ChicagoState  
ILZip Code  
60606-0000Purpose of Disbursement  
WiFi Services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2018

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

12.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. IContact, Inc.**

Mailing Address 5221 Paramount Parkway

City  
MorrisvilleState  
NCZip Code  
27560-0000Purpose of Disbursement  
Email Marketing

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

720.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PayPal Merchant Services**

Mailing Address 2211 N. First St.

City  
San JoseState  
CAZip Code  
95131-0000Purpose of Disbursement  
Merchant Processing Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

174.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sign11.com**

Mailing Address 3655 Burnette Park Dr

City  
SuwaneeState  
GAZip Code  
30024-0000Purpose of Disbursement  
LP Promotional Materials

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

207.40

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Postmaster - USPS HQ**

Mailing Address 475 L'Enfant Plaza SW #4446

City  
WashingtonState  
DCZip Code  
20260-4446Purpose of Disbursement  
Postage

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0				

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

13.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SquareUp Payment Processing**

Mailing Address 1455 Market St #600

City  
San FranciscoState  
CAZip Code  
94103-0000Purpose of Disbursement  
Staff Travel - Taxi

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0				

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

34.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. StorQuest**

Mailing Address 16980 Cottonwood Drive

City  
ParkerState  
COZip Code  
80134-0000Purpose of Disbursement  
Storage Rent

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0				

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

273.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. SunStar Press**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2018

Mailing Address 109 Latigo Dr.  
C/of Mary RuwartCity  
BurnetState  
TXZip Code  
78611-0000Purpose of Disbursement  
LP Promotional Materials

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

128.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Typeform c/of WPS, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2018

Mailing Address P.O. Box 81226

City  
SeattleState  
WAZip Code  
98108-1226Purpose of Disbursement  
Internet Forms

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

35.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2018

Mailing Address 1455 Market St Fl 4

City  
San FranciscoState  
CAZip Code  
94103-0000Purpose of Disbursement  
Staff Travel - Car

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

20.54

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. ULine, Inc.**

Mailing Address PO Box 88741

City  
ChicagoState  
ILZip Code  
60680-1741Purpose of Disbursement  
Shipping Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	2		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

152.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UStream.TV**

Mailing Address 410 Townsend St

City  
San FranciscoState  
CAZip Code  
94107-0000Purpose of Disbursement  
Video Streaming Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	2		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

79.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WP Engine**

Mailing Address 504 Lavaca Street, Suite 1000

City  
AustinState  
TXZip Code  
78701-0000Purpose of Disbursement  
Website Hosting Expense

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	8		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59459

Amount of Each Disbursement this Period

249.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Benedict, Robert, , ,**

Mailing Address 6922 Lodestone Ct

City  
AlexandriaState  
VAZip Code  
22306-1216Purpose of Disbursement  
Employee Net Pay

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

**C****Transaction ID : SB21B.59485**

Amount of Each Disbursement this Period

2765.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Benedict, Robert, , ,**

Mailing Address 6922 Lodestone Ct

City  
AlexandriaState  
VAZip Code  
22306-1216Purpose of Disbursement  
Employee Net Pay

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	1			2	0	1	8		

FEC Identification Number

**C****Transaction ID : SB21B.59486**

Amount of Each Disbursement this Period

2765.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bigeye Direct, Inc.**

Mailing Address PO Box 710865

City  
Oak HillState  
VAZip Code  
20171-0865Purpose of Disbursement  
Non Candidate Party Printing and Mailing Service

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

**C****Transaction ID : SB21B.59488**

Amount of Each Disbursement this Period

841.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6373.05

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Blackbaud, Inc.**

Mailing Address P.O. Box 930256

City  
AtlantaState  
GAZip Code  
31193-0256Purpose of Disbursement  
PNCOA Address Corrections

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59490**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Blackbaud, Inc.**

Mailing Address P.O. Box 930256

City  
AtlantaState  
GAZip Code  
31193-0256Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59491**

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Blackbaud, Inc.**

Mailing Address P.O. Box 930256

City  
AtlantaState  
GAZip Code  
31193-0256Purpose of Disbursement  
Credit Card Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59492**

Amount of Each Disbursement this Period

511.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1041.65

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Botkin, Elizabeth, , ,**

Mailing Address 15515 Josephine St

City  
OmahaState  
NEZip Code  
68138-7437Purpose of Disbursement  
Membership Support Services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2018

FEC Identification Number

C

Transaction ID : SB21B.59493

Amount of Each Disbursement this Period

1020.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Brierly, Elizabeth, C., ,**

Mailing Address PO Box 611021

City  
San JoseState  
CAZip Code  
95161-1021Purpose of Disbursement  
Drop Box Subscription Reimbursement see Memo

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2018

FEC Identification Number

C

Transaction ID : SB21B.59495

Amount of Each Disbursement this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Dropbox**

Mailing Address 185 Berry St STE 400

City  
San FranciscoState  
CAZip Code  
94107-0000Purpose of Disbursement  
Drop Box Subscription

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2018

FEC Identification Number

C

Transaction ID : SB21B.59495

Amount of Each Disbursement this Period

99.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1119.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Brierly, Elizabeth, C., ,**

Mailing Address PO Box 611021

City  
San JoseState  
CAZip Code  
95161-1021Purpose of Disbursement  
Administrative Support Services & Writing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	20	/	2018

FEC Identification Number

C

Transaction ID : SB21B.59494

Amount of Each Disbursement this Period

2131.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Burns, Andrew, , ,**

Mailing Address 2790 Xerxes Ave S Apt 3

City  
MinneapolisState  
MNZip Code  
55416-0000Purpose of Disbursement  
Affiliate Support Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	19	/	2018

FEC Identification Number

C

Transaction ID : SB21B.59497

Amount of Each Disbursement this Period

1920.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Burns, Andrew, , ,**

Mailing Address 2790 Xerxes Ave S Apt 3

City  
MinneapolisState  
MNZip Code  
55416-0000Purpose of Disbursement  
Reimbursed Expenses - See Memo

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	19	/	2018

FEC Identification Number

C

Transaction ID : SB21B.59498

Amount of Each Disbursement this Period

150.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4201.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. iThemes**

Mailing Address 1720 S Kelly Ave

City  
EdmondState  
OKZip Code  
73013-0000Purpose of Disbursement  
Website Plug-in

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59498

Amount of Each Disbursement this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CareFirst BlueChoice, Inc.**

Mailing Address PO Box 79749

City  
BaltimoreState  
MDZip Code  
21279-0749Purpose of Disbursement  
Employee health and Dental

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59501

Amount of Each Disbursement this Period

4120.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Commonwealth Digital Office Solutions**

Mailing Address 21205 Ridgetop Circle

City  
SterlingState  
VAZip Code  
20166-6501Purpose of Disbursement  
Copier Maintenance & Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59504

Amount of Each Disbursement this Period

214.17

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4335.13

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Commonwealth Digital Office Solutions**

Mailing Address 21205 Ridgeway Circle

City  
SterlingState  
VAZip Code  
20166-6501Purpose of Disbursement  
Copier Maintenance & Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59505

Amount of Each Disbursement this Period

366.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Daugherty, Lauren, , ,**

Mailing Address 5236 Lake Shore Dr

City  
WacoState  
TXZip Code  
76710-1733Purpose of Disbursement  
Admin Support

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59507

Amount of Each Disbursement this Period

2380.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Daugherty, Lauren, , ,**

Mailing Address 5236 Lake Shore Dr

City  
WacoState  
TXZip Code  
76710-1733Purpose of Disbursement  
Admin Support

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59508

Amount of Each Disbursement this Period

1400.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4146.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 76 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Dixon, Eric, D., Mr.,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2018

Mailing Address 2643 Arlington Dr Apt 304

City  
AlexandriaState  
VAZip Code  
22306-3618Purpose of Disbursement  
Employee Net Pay

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB21B.59510**

Amount of Each Disbursement this Period

1697.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Dixon, Eric, D., Mr.,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2018

Mailing Address 2643 Arlington Dr Apt 304

City  
AlexandriaState  
VAZip Code  
22306-3618Purpose of Disbursement  
Employee Net Pay

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB21B.59511**

Amount of Each Disbursement this Period

1697.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Dominion Virginia Power**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2018

Mailing Address PO Box 26543

City  
RichmondState  
VAZip Code  
23290-0001Purpose of Disbursement  
Electric

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB21B.59512**

Amount of Each Disbursement this Period

440.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3835.50

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Dunbar, Dominick, J., Mr.,**

Mailing Address 75 Aquia Creek Rd

City  
StaffordState  
VAZip Code  
22554-5528Purpose of Disbursement  
Employee Net Pay

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59514**

Amount of Each Disbursement this Period

201.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Dunbar, Dominick, J., Mr.,**

Mailing Address 75 Aquia Creek Rd

City  
StaffordState  
VAZip Code  
22554-5528Purpose of Disbursement  
Employee Net Pay

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	1			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59515**

Amount of Each Disbursement this Period

48.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Edwards, Paula, , ,**

Mailing Address 1200 G Street, N.W. Suite 800

City  
WashingtonState  
DCZip Code  
20005-0000Purpose of Disbursement  
Fec Filing and Amendments

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59517**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1750.06

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Fields, Richard, G., Mr.,**

Mailing Address 1915 Alicante St

City  
DavisState  
CAZip Code  
95618-6566Purpose of Disbursement  
Press Release Writing and Editing

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59691

Amount of Each Disbursement this Period

2035.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Fields, Richard, G., Mr.,**

Mailing Address 1915 Alicante St

City  
DavisState  
CAZip Code  
95618-6566Purpose of Disbursement  
Press Release Writing and Editing

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59520

Amount of Each Disbursement this Period

966.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Federal Unemployment

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59521

Amount of Each Disbursement this Period

42.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3044.20

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Federal Withholding

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59522

Amount of Each Disbursement this Period

1485.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Medicare Company

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59523

Amount of Each Disbursement this Period

183.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Medicare Employee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59524

Amount of Each Disbursement this Period

183.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1852.84

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Social Security Company

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59525**

Amount of Each Disbursement this Period

786.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Social Security Employee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59526**

Amount of Each Disbursement this Period

786.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Federal Unemployment

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59527**

Amount of Each Disbursement this Period

21.17

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1593.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 81 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Federal Withholding

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0				2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.59528**

Amount of Each Disbursement this Period

1736.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Medicare Company

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0				2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.59529**

Amount of Each Disbursement this Period

188.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Medicare Employee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0				2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.59530**

Amount of Each Disbursement this Period

188.42

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2112.84

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

**A. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Social Security Company

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59531

Amount of Each Disbursement this Period

805.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Financial Agent Federal Tax Deposit**

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
Social Security Employee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59532

Amount of Each Disbursement this Period

805.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FP Mailing Solutions**

Mailing Address PO Box 4510

City  
Carol StreamState  
ILZip Code  
60197-4510Purpose of Disbursement  
Postage & Meter Resets

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	8		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59533

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3611.38

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Great American Leasing**

Mailing Address PO Box 660831

City  
DallasState  
TXZip Code  
75266-0831Purpose of Disbursement  
Post Meter Lease Agreement

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2018

FEC Identification Number

C

**Transaction ID : SB21B.59534**

Amount of Each Disbursement this Period

189.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gura, PLLC**

Mailing Address 906 Price St, Ste 107

City  
AlexandriaState  
VAZip Code  
22314-0000Purpose of Disbursement  
Legal Expense

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2018

FEC Identification Number

C

**Transaction ID : SB21B.59535**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hall, Oliver, , ,**

Mailing Address 1835 16th St NW #5

City  
WashingtonState  
DCZip Code  
20009-0000Purpose of Disbursement  
Legal Retainer

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2018

FEC Identification Number

C

**Transaction ID : SB21B.59690**

Amount of Each Disbursement this Period

4500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9689.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Hall, Oliver, , ,**

Mailing Address 1835 16th St NW #5

City  
WashingtonState  
DCZip Code  
20009-0000Purpose of Disbursement  
Legal Retainer

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	8		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59538

Amount of Each Disbursement this Period

4500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Harlos, Caryn Ann, , ,**

Mailing Address 874 S Lindsey St

City  
Castle RockState  
COZip Code  
80104-8917Purpose of Disbursement  
Reimbursed Expense See Memo

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	4		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59539

Amount of Each Disbursement this Period

422.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon.com**

Mailing Address 1200 12th Avenue South #1200

City  
SeattleState  
WAZip Code  
98144-2734Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	4		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59538

Amount of Each Disbursement this Period

141.25

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4922.25

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. QuadGroup - Creative Broadcast Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2018

Mailing Address 209 East 12th Street  
C/of Larry LeodhamCity  
MarysvilleState  
CAZip Code  
95901-0000Purpose of Disbursement  
Video Editing Services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.59539

Amount of Each Disbursement this Period

281.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Harlos, Caryn Ann, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2018

Mailing Address 874 S Lindsey St

City  
Castle RockState  
COZip Code  
80104-8917Purpose of Disbursement  
Reimbursed Travel Expense See Memo

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.59543

Amount of Each Disbursement this Period

439.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2018

Mailing Address PO Box 36662

City  
DallasState  
TXZip Code  
75235-6682Purpose of Disbursement  
Travel - Air

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.59543

Amount of Each Disbursement this Period

274.97

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

439.73
--------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. La Quinta, Inc.**

Mailing Address 909 Hidden Ridge

City  
IrvingState  
TXZip Code  
75038-0000Purpose of Disbursement  
Travel - Hotel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59543

Amount of Each Disbursement this Period

152.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 1455 Market St Fl 4

City

San Francisco

State

CA

Zip Code

94103-0000

Purpose of Disbursement  
Travel - Car

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59543

Amount of Each Disbursement this Period

11.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Johnston, Robert, , ,**

Mailing Address P. O. Box 35064

City

Baltimore

State

MD

Zip Code

21222-5064

Purpose of Disbursement  
Contract labor admin services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59543

Amount of Each Disbursement this Period

2160.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2160.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Johnston, Robert, , ,**

Mailing Address P. O. Box 35064

City  
BaltimoreState  
MDZip Code  
21222-5064Purpose of Disbursement  
Contract labor admin services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2018

FEC Identification Number

C

Transaction ID : SB21B.59549

Amount of Each Disbursement this Period

2180.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Konica Minolta Premier**

Mailing Address PO Box 41602

City  
PhiladelphiaState  
PAZip Code  
19101-1602Purpose of Disbursement  
Copier Lease

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2018

FEC Identification Number

C

Transaction ID : SB21B.59550

Amount of Each Disbursement this Period

565.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kraus, Robert, S., ,**Mailing Address 205 Yoakum Pkwy  
Apt 1111City  
AlexandriaState  
VAZip Code  
22304-3857Purpose of Disbursement  
Employee Net Pay

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2018

FEC Identification Number

C

Transaction ID : SB21B.59551

Amount of Each Disbursement this Period

1590.92

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4336.79

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Kraus, Robert, S., ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	1			2	0	1	8		

Mailing Address 205 Yoakum Pkwy  
Apt 1111City  
AlexandriaState  
VAZip Code  
22304-3857Purpose of Disbursement  
Employee Net Pay

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.59552

Amount of Each Disbursement this Period

1952.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Luckey, Denise, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

Mailing Address 1367 Hickory Hills Dr

City  
MurchisonState  
TXZip Code  
75778-4502Purpose of Disbursement  
Administrative Support & Graphic Design

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.59553

Amount of Each Disbursement this Period

1187.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Luckey, Denise, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	1	8		

Mailing Address 1367 Hickory Hills Dr

City  
MurchisonState  
TXZip Code  
75778-4502Purpose of Disbursement  
Administrative Support & Graphic Design

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.59554

Amount of Each Disbursement this Period

1850.88

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4990.79

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Master Print, Inc.**

Mailing Address PO Box 1467

City  
NewingtonState  
VAZip Code  
22122-1467Purpose of Disbursement  
Non Candidate Party Printing Service

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2018

FEC Identification Number

C

Transaction ID : SB21B.59555

Amount of Each Disbursement this Period

903.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mears, Jessica, , Ms.,**

Mailing Address 5536 2nd Ave N

City  
Saint PetersburgState  
FLZip Code  
33710-8010Purpose of Disbursement  
Administrative Support Services

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2018

FEC Identification Number

C

Transaction ID : SB21B.59556

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Merchant Services**

Mailing Address 890 Mountain Ave

City  
New ProvidenceState  
NJZip Code  
07974-0000Purpose of Disbursement  
Merch Processing Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2018

FEC Identification Number

C

Transaction ID : SB21B.59557

Amount of Each Disbursement this Period

752.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5655.78

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Miller's Office Products, Inc.**

Mailing Address PO Box 1537

City  
NewingtonState  
VAZip Code  
22122-1537Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59558**

Amount of Each Disbursement this Period

72.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Miller's Office Products, Inc.**

Mailing Address PO Box 1537

City  
NewingtonState  
VAZip Code  
22122-1537Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59559**

Amount of Each Disbursement this Period

197.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Miller's Office Products, Inc.**

Mailing Address PO Box 1537

City  
NewingtonState  
VAZip Code  
22122-1537Purpose of Disbursement  
Office Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59560**

Amount of Each Disbursement this Period

101.82

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

371.99

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 91 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. One Dog Solutions**

Mailing Address 7360 Landeu Dr.

City  
BloomingtonState  
MNZip Code  
55438-0000Purpose of Disbursement  
Administrative Support & Graphic Design

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59561

Amount of Each Disbursement this Period

253.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PayPal Merchant Services**

Mailing Address 2211 N. First St.

City  
San JoseState  
CAZip Code  
95131-0000Purpose of Disbursement  
Merch Processing Fee

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59562

Amount of Each Disbursement this Period

724.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Pazzell, Jordan, , ,**

Mailing Address 8831 W State Hwy

City  
CoppertonState  
UTZip Code  
84006-0000Purpose of Disbursement  
Reimbursed Travel See Memo

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59564

Amount of Each Disbursement this Period

927.91

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1906.44

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 92 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Airbnb, Inc.**

Mailing Address 888 Brannan Street

City  
San FranciscoState  
CAZip Code  
94103-0000Purpose of Disbursement  
Travel - Hotel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59564

Amount of Each Disbursement this Period

347.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Enterprise Rent-A-Car, Inc.**

Mailing Address 600 Corporate Park Drive

City  
St. LouisState  
MOZip Code  
63105-0000Purpose of Disbursement  
Travel - Car Rental

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59564

Amount of Each Disbursement this Period

580.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Pazzell, Jordan, , ,**

Mailing Address 8831 W State Hwy

City  
CoppertonState  
UTZip Code  
84006-0000Purpose of Disbursement  
Employee Net Pay

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59564

Amount of Each Disbursement this Period

1318.83

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1318.83

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 93 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Pazzell, Jordan, , ,**

Mailing Address 8831 W State Hwy

City  
CoppertonState  
UTZip Code  
84006-0000Purpose of Disbursement  
Employee Net Pay

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	1		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59569**

Amount of Each Disbursement this Period

1318.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PNC Visa Card**

Mailing Address P.O. Box 856176

City  
LouisvilleState  
KYZip Code  
40285-6176Purpose of Disbursement  
PNC Visa Card Payment (See Memos)

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	7		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59572**

Amount of Each Disbursement this Period

159.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Adobe Systems**

Mailing Address 801 N. 324th St.

City  
SeattleState  
WAZip Code  
98103-8882Purpose of Disbursement  
Adobe Cloud Software Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	4		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59572**

Amount of Each Disbursement this Period

49.99

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1477.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 94 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. DataJack, Inc.**

Mailing Address 14911 Quorum Drive #140

City  
DallasState  
TXZip Code  
75254-0000Purpose of Disbursement  
WiFi Internet Service

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	2		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59572

Amount of Each Disbursement this Period

9.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lexis-Nexis t/a Accurint**

Mailing Address P.O. Box 538358

City  
AtlantaState  
GAZip Code  
30353-8358Purpose of Disbursement  
Address and Phone Verification

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				0	2		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59572

Amount of Each Disbursement this Period

28.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Telecompute Corporation**

Mailing Address P.O. Box 919512

City  
OrlandoState  
FLZip Code  
32891-9512Purpose of Disbursement  
1-800 Service

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				0	1		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59572

Amount of Each Disbursement this Period

40.51

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 95 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Wufoo.com**

Mailing Address 285 Hamilton Avenue Suite 500

City  
Palo AltoState  
CAZip Code  
94301-0000Purpose of Disbursement  
Internet Forms

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59572

Amount of Each Disbursement this Period

29.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Postmaster - Alexandria BRM**

Mailing Address 2226 Duke St.

City  
AlexandriaState  
VAZip Code  
22314-0000Purpose of Disbursement  
Business Reply Mail Postage

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59578

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. QuickBooks Payroll Service**

Mailing Address PO Box 30015

City  
RenoState  
NVZip Code  
89520-3015Purpose of Disbursement  
Payroll Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.59575

Amount of Each Disbursement this Period

128.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1128.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 96 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. QuickBooks Payroll Service**

Mailing Address PO Box 30015

City  
RenoState  
NVZip Code  
89520-3015Purpose of Disbursement  
Payroll Processing Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59580**

Amount of Each Disbursement this Period

19.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Round House Sq UOA**

Mailing Address 6231 Leesburg Pk #100

City  
Falls ChurchState  
VAZip Code  
22044-0000Purpose of Disbursement  
Association Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				0	1		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59581**

Amount of Each Disbursement this Period

296.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Schultz, Cara, , ,**

Mailing Address 30 Walden St.

City  
BurnsvilleState  
MNZip Code  
55337-0000Purpose of Disbursement  
Candidate Recruitment & Support Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				0	7		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59582**

Amount of Each Disbursement this Period

7965.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8280.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 97 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Signature Masters, Inc.**

Mailing Address 41800 Hayes Rd.

City  
Clinton TownshipState  
MIZip Code  
48038-0000Purpose of Disbursement  
Party Ballot Access Petitioning

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59583**

Amount of Each Disbursement this Period

1477.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Signature Masters, Inc.**

Mailing Address 41800 Hayes Rd.

City  
Clinton TownshipState  
MIZip Code  
48038-0000Purpose of Disbursement  
Party Ballot Access Petitioning

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59584**

Amount of Each Disbursement this Period

1300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Signature Masters, Inc.**

Mailing Address 41800 Hayes Rd.

City  
Clinton TownshipState  
MIZip Code  
48038-0000Purpose of Disbursement  
Party Ballot Access Petitioning

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59585**

Amount of Each Disbursement this Period

1135.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3912.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 98 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Signature Masters, Inc.**

Mailing Address 41800 Hayes Rd.

City  
Clinton TownshipState  
MIZip Code  
48038-0000Purpose of Disbursement  
Party Ballot Access Petitioning

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	7		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59586**

Amount of Each Disbursement this Period

3967.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Publishing and Mailing**

Mailing Address 4000 SE Adams Street

City  
TopekaState  
KSZip Code  
66609-1481Purpose of Disbursement  
Non Candidate Party Printing & Mailing Service

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	6		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59587**

Amount of Each Disbursement this Period

4649.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stigler Printing**

Mailing Address Box 549 - 204 S. Broadway

City  
StiglerState  
OKZip Code  
74462-0000Purpose of Disbursement  
LP News Printing

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	4		2	0	1	8		

FEC Identification Number

C

**Transaction ID : SB21B.59588**

Amount of Each Disbursement this Period

1644.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10261.31

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 99 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Thexton, Matthew, A., Mr.,**

Mailing Address PO Box 6232

City  
Falls ChurchState  
VAZip Code  
22040-6232Purpose of Disbursement  
Employee Net Pay

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2018

FEC Identification Number

C Transaction ID : SB21B.59589

Amount of Each Disbursement this Period

1362.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Thexton, Matthew, A., Mr.,**

Mailing Address PO Box 6232

City  
Falls ChurchState  
VAZip Code  
22040-6232Purpose of Disbursement  
Employee Net Pay

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2018

FEC Identification Number

C Transaction ID : SB21B.59590

Amount of Each Disbursement this Period

1128.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Utah State Tax Commission**

Mailing Address 210 North 1950 West

City  
Salt lake cityState  
UTZip Code  
84116-0000Purpose of Disbursement  
UT - Withholding

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2018

FEC Identification Number

C Transaction ID : SB21B.59592

Amount of Each Disbursement this Period

86.54

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2577.67

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 100 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Utah State Tax Commission**

Mailing Address 210 North 1950 West

City  
Salt lake cityState  
UTZip Code  
84116-0000Purpose of Disbursement  
UT - Withholding

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2018

FEC Identification Number

C

**Transaction ID : SB21B.59593**

Amount of Each Disbursement this Period

86.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Virginia Dept. of Taxation**

Mailing Address PO Box 26644

City  
RichmondState  
VAZip Code  
23261-6644Purpose of Disbursement  
VA - Unemployment Company

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2018

FEC Identification Number

C

**Transaction ID : SB21B.59593**

Amount of Each Disbursement this Period

34.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Virginia Dept. of Taxation**

Mailing Address PO Box 26644

City  
RichmondState  
VAZip Code  
23261-6644Purpose of Disbursement  
VA - Withholding

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2018

FEC Identification Number

C

**Transaction ID : SB21B.59593**

Amount of Each Disbursement this Period

648.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

768.68

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 101 OF 103

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Virginia Dept. of Taxation**

Mailing Address PO Box 26644

City  
RichmondState  
VAZip Code  
23261-6644Purpose of Disbursement  
VA - Unemployment Company

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0				2	0		18

FEC Identification Number

C

**Transaction ID : SB21B.59597**

Amount of Each Disbursement this Period

15.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Virginia Dept. of Taxation**

Mailing Address PO Box 26644

City  
RichmondState  
VAZip Code  
23261-6644Purpose of Disbursement  
VA - Withholding

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0				2	0		18

FEC Identification Number

C

**Transaction ID : SB21B.59598**

Amount of Each Disbursement this Period

674.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Windstream - Broadview**

Mailing Address PO Box 9242

City  
UniondaleState  
NYZip Code  
11555-9242Purpose of Disbursement  
Phone system & usage

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				0	7				2	0		18

FEC Identification Number

C

**Transaction ID : SB21B.59600**

Amount of Each Disbursement this Period

1016.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1706.03

126906.08

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 102 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Slantz, Jean, , ,**

Mailing Address 1620 Congress Way

City  
Saint CharlesState  
MOZip Code  
63303-8444Purpose of Disbursement  
Contribution Refund

010

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB28A.59687

Amount of Each Disbursement this Period

399.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Slantz, William, , ,**

Mailing Address 1620 Congress Way

City  
Saint CharlesState  
MOZip Code  
63303-8444Purpose of Disbursement  
Contribution Refund

010

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB28A.59688

Amount of Each Disbursement this Period

399.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

798.00

**TOTAL** This Period (last page this line number only)..... ►

798.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 103 OF 103

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fields, Richard, G., Mr.,

Nature of Debt (Purpose):

Press Release Writing and Editing

Mailing Address 1915 Alicante St

City  
DavisState  
CAZip Code  
95618-6566

Outstanding Balance Beginning This Period

2035.50

Transaction ID : SD10.56292

Amount Incurred This Period

0.00

Payment This Period

2035.50

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hall, Oliver, , ,

Nature of Debt (Purpose):

Legal Retainer

Mailing Address 1835 16th St NW #5

City  
WashingtonState  
DCZip Code  
20009-0000

Outstanding Balance Beginning This Period

4500.00

Transaction ID : SD10.56293

Amount Incurred This Period

0.00

Payment This Period

4500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

0.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►